

GIC Health Plan Rates – Monthly Rates as of July 1, 2009

For THE CITY OF PITTSFIELD ENROLLEES



Commonwealth of Massachusetts
Group Insurance Commission

Active Employees, Retirees, and Survivors *WITHOUT* MEDICARE

Includes 0.33% Administrative Fee



	Employee and Non-Medicare Retiree/Survivor Pays Monthly %	Employee and Non-Medicare Retiree/Survivor Pays Monthly \$	Employee and Non-Medicare Retiree/Survivor Pays Monthly \$
HEALTH PLAN		Individual Coverage	Family Coverage
Fallon Community Health Plan Direct Care	15%	\$ 60.86	\$146.06
Fallon Community Health Plan Select Care	15%	\$ 73.80	\$177.12
Harvard Pilgrim Independence Plan	15%	\$ 78.94	\$191.06
Health New England	15%	\$ 64.68	\$160.30
Navigator by Tufts Health Plan	15%	\$ 77.86	\$187.62
NHP Care (<i>Neighborhood Health Plan</i>)	15%	\$ 62.52	\$165.70
UniCare State Indemnity Plan/Basic <i>with</i> CIC (<i>Comprehensive</i>)	15%	\$115.14	\$268.78
UniCare State Indemnity Plan/Basic <i>without</i> CIC (<i>Non-Comprehensive</i>)	15%	\$109.80	\$256.42
UniCare State Indemnity Plan/ Community Choice	15%	\$ 61.70	\$148.06
UniCare State Indemnity Plan/PLUS	15%	\$ 79.88	\$190.60

Retirees and Survivors *WITH* MEDICARE

	Retiree and Survivor Retiree/Survivor Pays Monthly Per Person	
HEALTH PLAN	%	\$
Fallon Senior Plan*	15%	\$ 30.02
Harvard Pilgrim Medicare Enhance	15%	\$ 52.50
Health New England MedPlus	15%	\$ 54.50
Tufts Health Plan Medicare Complement	15%	\$ 48.24
Tufts Health Plan Medicare Preferred*	15%	\$ 26.72
UniCare State Indemnity Plan/Medicare Extension (OME) <i>with</i> CIC (<i>Comprehensive</i>)	15%	\$ 52.96
UniCare State Indemnity Plan/Medicare Extension (OME) <i>without</i> CIC (<i>Non-Comprehensive</i>)	15%	\$ 51.36

* Rates are subject to federal approval and may change January 1, 2010.

Rates are Calculated by the City of Pittsfield Benefits Office.

**Rate questions? Active City Employees and All Retirees Call: Nancy Dinofrio at 413.448.9808
Active School Employees Call: Pam Delmolino at 413.499.9506**